



DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

As a below named inventor, I hereby declare that:

My residence/post office	ce addre	ss and citizenship are a	stated below next	to my name;		
I believe I am the origing in the coriging in the coriginal patent is sought on the coriginal patent is sought on the coriginal in the coriginal patent is sought on the coriginal in the corigin	names	and sole inventor (if on are listed below) of the on entitled:	ly one name is listed e subject matter wh	below) or an o ich is claimed a	riginal, first and and for which a	
Method And Apparatus	For Ca	librating A Multiport Tes	st System For Measu	rement Of A DI	JT	
the specification of wh	ich is at	tached hereto unless th	e following box is ch	necked:		
() was filed on <u>S</u> Number <u>09/954809</u>	Sep 18, 2	2001 as US Applic was amended on	ation Serial No. or P	CT Internationa applicable).	l Application	
including the claims, a	is amen	iewed and understood ded by any amendment s material to patentabili	t(s) referred to abov	e. I acknowle	ed specification, dge the duty to	
Foreign Application(s) and/or	r Claim of	Foreign Priority				
inventor(s) certificate listed	below and	s under Title 35, United State I have also identified below a ion on which priority is claim	ny foreign application for			
· COUNTRY	T	APPLICATION NUMBER	DATE FILED	PRIORITY CLAIMED	UNDER 35 U.S.C. 119	
		- \		YES:	NO:	
				YES:	NO:	
Provisional Application I hereby claim the benefit ubelow:	nder Title	35, United States Code Sect	tion 119(e) of any United	States provisional	application(s) listed	
	AP	PLICATION SERIAL NUMBER	FILING DATE	· ·		
	٠.				•	
U. S. Priority Claim						
manner provided by the firs information as defined in Tit	t paragrap le 37, Cod	of the claims of this applicated of Title 35, United States de of Federal Regulations, Securnational filing date of this approximate of the security of the se	Code Section 112, I ack ction 1.56(a) which occur	nowledge the duty	to disclose material	
APPLICATION SERIAL NUMBER		FILING DATE	STATUS (STATUS (patented/pending/abandoned)		
		,				
POWER OF ATTORNEY: As a named inventor, I he business in the Patent and T		int the following attorney(s) Office connected therewith:	and/or agent(s) to prose	ecute this applicat	ion and transact all	
Customer	Number	022878	Place Customer Number Bar Code Label here	·	•	
Send Correspondence to AGILENT TECHNOLOGIE		,	Direct Telephor	ne Calls To:		
Legal Department, DL42	9		Gerald P. Joyce	m .		
Intellectual Property Adn P.O. Box 7599	ninistratio	п	(978) 681-2405			
Loveland, Colorado 805	37-0599		·		,	
made on information with the knowledge imprisonment, or both	and be that wi i, under	ments made herein of r lief are believed to be t llful false statements Section 1001 of Title ze the validity of the ap	true; and further tha and the like so ma 18 of the United Sta	at these statem ade are punish ates Code and	ents were made able by fine or that such willful	
Full Name of Inventor: Vahe' A. Adamian			Citizenship: US			
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1/121	1, St	dum =	5/	29/02		
Inventor's Signature	1-1-1	wy//	Date	11-00		

DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION (continued)

APR 2 8 2003



		ALLWA TRACES				
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Vetus Kly	Din		5-02			
Inventor's Signature Date						
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Hotrine 1	nous	29	MAY OZ			
Inventor's Signature	A service	Date				
-	<i>y</i>					
Full Name of # 4 joint inventor	:		Citizenship:			
Residence:						
Post Office Address:						
Inventor's Signature		Date				
	•		•			
Full Name of # 5 joint inventor	:		Citizenship:			
Residence:			-			
Post Office Address:						
Inventor's Signature		Date	· .			
•						
Full Name of # 6 joint inventor	• .		Citizenship:			
Residence:						
Post Office Address:	,					
, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
Inventor's Signature		Date				
Full Name of # 7 joint inventor	· :		Citizenship:			
Residence:			Ortzensnip.			
Post Office Address:			,			
. Jos omios Addiess.						
Inventor's Signature		Date				
Full Name of # 8 joint inventor	•		Citizenship:			
Residence:						
Post Office Address:						
rost Office Address.						
Inventor's Signature			·			